

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM

INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the Complete this report wher Retain the original and ser	iever the instrument i	is serviced or repaired an	d whenever it is placed	exceed 35 days). I into service.	RECEIVED By Carol Day at 9:29 am, Feb 10, 2014	
итох омт sn 500010		lice Department			DATE OF INSPECTION 01/27/2014	
LOCATION OF INSTRUMENT (STREET 120 City Hall Drive, Et	reka, Mo. 63025			ПМЕ ОF INSPECTION 106:10:33	пме оf INSPECTION 06:10:33	
CHECKLIST: Place a ma values where determined).	rk in the box by each Unmarked items mι	item if found to be satisfust be corrected before u	actory or is operating w	vithin established lin	nits. (Write in observed	
☑ DIAGNOSTIC RECO				,,,,		
DATE AND TIME <u>01/27/2014 06:10:35</u>			☑ DETECTOR			
☑ PROGRAM		☑ FILTER 1				
☑ SAMPLE CHAMB		☑ FILTER 2				
☑ BREATH TUBE 43.5°C			☑ FILTER 3			
☑ PUMP	☑ PUMP			☑ INTERNAL STANDARD		
BREATH ANALYZER AC		RDS				
SIMULATOR STANDARD			☐ COMPRESSED ETHANOL-GAS MIXTURE			
STANDARD SUPPLIE			13010	EXP. DAT	E_01/09/2015	
SIMULATOR TEMP (3			TOR SN SD1371		P DATE 10/11/2014	
☑ 0.10% STAND ☐ 0.08% STAND	ie box correspondini ARD - MUST READ ARD - MUST READ	g to the standard being to BETWEEN 0.095% AN BETWEEN 0.076% AN BETWEEN 0.038% AN	ised. ID 0.105% INCLUSIVE ID 0.084% INCLUSIVE	E		
TEST 1: 0.100		TEST 2: 0.100		TEST 3: 0.100		
PERFORM R.F.I. TES						
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:						
REFUSALS: 0 0	04: 0	.0509: 0	.1014: 0	.1519: 1	OVER 19:0	
LIST ANY NEW PARTS AND DESCRIB ESTABLISHED LIMITS (USE OTHER S	E ANY ALTERATION OR MOD DE IF NECESSARY)	DIFICATION THAT WAS MADE TO	RESTORE THE INSTRUMENT T	TO OPERATE SATISFACTO	PRILY AND WITHIN	
This instrument is operating wit	hin the Department of H	Health and Senior Services s	pecifications.			
NSPECTING OFFICER						
SIGNATURE AND COL		an residence of the second	PRINT FULL NAME TIM S GRAHAM			
YPE II PERMIT NUMBER 1671-1671- 230220		EXPIRATION DATE 10/17/2015	TELEPHONE NU 636-938-			
RETURN COMPLETED R	5	Breath Alcohol Program, Southeast District Office 2875 James Blvd, Poplar	MO Department of He		rvices	
O 580-2898 (3-13)			FIRMATIVE ACTION EMPLOYED	B		



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13010 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 14, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is January 9, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



PERMIT TYPE II

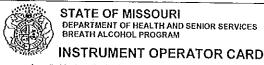
TIMOTHY S GRAHAM

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE10/17/2013	want
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230220	Dal Vasterly
EXPIRES 10/17/2015	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
AD 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
• •	LAB 4 (R6-10)



The named cardholder is authorized to operate an evidential breath alcohol. instrument for the determination of the alcoholic content in breath form of expired a in Missouri



Permit No 230220

Date Issued 10/17/2013

Date Expires 10/17/2015